14031183935

REPORT OF RECEIPTS **AND DISBURSEMENTS**

RECEIVED

2014 FEB 14 PH 12: 03

FUNIVI 3	For An A	Authorized Committee		Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRIN	T ▼ Example: If typi over the lines.	ng, type 12FE4M5	AILEGENTER
JD MINI	EAR FOR C	DNGRESS		
ADDRESS (number an	d street)	121, 121		
Check if difference than previous reported. (A	ISIY IDFFCI	1.GROVE		Ka1971-1
yang ang ang ang ang ang ang ang ang ang	CATION NUMBER V	CITY A	STATE A	ZIP CODE A STATE ▼ DISTRICT
C 0056	07137	3. IS THIS NEV (N)	OR AMENDE	
(a) Quarterly R	i Quarterly Report (Q1)	(b) 12-Day PRE -Election Rep	P) General (12	
	Quarterly Report (Q2)	Election on	/ [P	in the State of
January	31 Year-End Report (YE)	(c) 30-Day POST-Election Re		
Termina	ition Report (TER)	General (30	• • • • • • • • • • • • • • • • • • •	Special (30S)
u.m.·		Election on		State of
5. Covering Period	70'87	2013 through	12'37'	2017
I certify that I have e		the best of my knowledge and Sangs and	belief it is true, correct and	complete.
Signature of Treasure	majoin	Sunggland	Date Date	15 2014
NOTE: Submission of	false, erroneous, or incompl	ete information may subject the pe	erson signing this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

Page 2

of Receipts and Disbursements FEC Form 3 (Revised 02/2003) Write or Type Committee Name COPGRESS Report Covering the Period: From: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (other than loans) (from Line 11(e)) (b) Total Contribution Refunds (from Line 20(d)) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures (from Line 17) Total Offsets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of Reporting Period (from Line 27).....

- Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)
- 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

8 3 9 3 7

40 3

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JO MINIBAR FOR CONGRESS

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than		
	Political Committees	6 00 00	(A) (A)
	(i) Itemized (use Schedule A)	9 00.00	9 90 00
	(ii) Uniternized	001 48	9 00 00 ,601.49 150148
	(iii) TOTAL of contributions		
	from individuals	150148	150148
	p) Political Party Committees	الوالوالية المستخصر يسياق ليوريد والمستخصر المستخصر	man yang magamat pang ang panang magamat panang magamat panang magamat panang magamat panang magamat panang ma Manang magamat pang magamat panang magamat panang magamat panang magamat panang magamat panang magamat panang
(0	c) Other Political Committees (such as PACs)		and the state of t
	(such as FAOS)		<u> </u>
(0	l) The Candidate		- Torribe-2-1 in 2 : Torribe-2-1
(€	•		I make a distribution of the second of the second of the second
	(other than loans)	150148	150149
	(add Lines 11(a)(iii), (b), (c), and (d))	1,3,0,1,1,0	1,50148
12. T	RANSFERS FROM OTHER		linemanne nelimmelinmenthamit mendemmelen an ander error men
	UTHORIZED COMMITTEES	المستقل المستق	
13. L (á	OANS: a) Made or Guaranteed by the		
,	Candidate	, <u>,</u> 600.00	60000
	,		
(t	o) All Other Loans		 <u> </u>
(0	•	60000	60000
	(add Lines 13(a) and (b))		
14. C	FFSETS TO OPERATING		
	XPENDITURES		
(F	Refunds, Rebates, etc.)		I Same Committee on the Same Committee of the same of
15. C	THER RECEIPTS		
	Dividends, Interest, etc.)		
16. T	OTAL RECEIPTS (add Lines	the management of the control of the	
1	1(e), 12, 13(c), 14, and 15) Carry Total to Lire 24, page 4)	21.0148	21214
"	amu intal to lina 24 Dago Al		

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3 (Revised 02/2003) II. DISBURSEMENTS 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans

TOTAL LOAN REPAYMENTS

20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other

(c) Other Political Committees

(add Lines 19(a) and (b)).....

Than Political Committees.....

(such as PACs).....

(b) Political Party Committees.....

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21)

22. TOTAL DISBURSEMENTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	C. L. E. C. C. Strukur C. Lincoln C.
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	<u> </u>
25. SUBTOTAL (add Line 23 and Line 24)	2,10148
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	205/32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	50.16

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such					
NAME OF COMMITTEE (In Full) OF COMMITTEE (In Full)	HR FOR (CONGRE	28		
Full Name (Last, First, Middle Initial) YOUNG DAVID J Mailing Address 1442 ARK MEZ	+00W WAY)	Date of Receipt		
BEEZH GROVE	State Zip Cod	de 9107			
FEC ID number of contributing federal political committee.	Construction of the standard o		Amount of Each Receipt this Period		
Name of Employer	Occupation RETIRED		स्वत्राक्षणास्त्रम् सम्प्रात्त्रेत्रं स्वत्यस्यात् स्वत्यात्रात्त्रं वाक्षणास्त्रात्त्रं वाक्षणास्त्रेत् स्वत्		
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	10000			
Full Name (Last, First, Middle Initial) HUT SLAG, LOWELL	R		Date of Receipt		
Mailing Address S, SHEM	VAN DR.		10 2013		
CHY TUDIA NAPOUS	State ZID Co.	237			
FEC ID number of contributing federal political committee.	C:		Amount of Each Receipt this Period		
Name of Employer	Occupation RETIREO		ำแบบ เดิงแบบ จากเหมืองของ คารเหมืองแก้ ปี การจาก คามหมากเมื่อก จาก เดิงเกร		
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	(0000			
Full Name (Last, First, Middle Initial) CHRISTY, JACK L			Date of Receipt		
Mailing Address 685 MADISON AV City TUDIANAPOUS	K		11/18/2013		
THOIAHAPOUS	State Zip Co	227			
fect ID number of contributing federal political committee.			Amount of Each Receipt this Period		
Name of Employer CHRISTYS OF INDIANA Receipt For:	Occupation AU CT (o N) Fination Orale to Date		mande see store a terrare and a set of a companion and a section of a section of		
Primary General Other (specify)	Election Cycle-to-Date	10000			
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(ct ITEMIZED DISBURSEMENTS **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solioit contributions from such committee. 1/0/EAR FOR CONGRESS Date of Disbursement SHELL Zip Code 46038 State Amount of Each Disbursement this Period espringer i epis enskriukuuksine aljun ekees Purpose of Disbursement ACCURATE OF SELECT GAS Candidate Name Category/ Type Office Sought: Disbursement For: House Primary General Senate Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Zip Code Amount of Each Disbursement this Period Purpose of Disbursement MEALS Category/ Type Office Sought: House Disbursement For: Primary General Senate Other (specify) President

State: District:			
Full Name (Last, First, Middle Initial) TEPPAN YAKI	GRILL		Date of Disbursement
	SMINGTON ST.		111 14 2013
LY DIA MARCHS	State Zip Code 76229		Amount of Each Disbursement this Period
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MEALS			
Candidate Name		Category/ Type	
Office Sought: House Senate	Disbursement For: Primary General		
President	Other (specify)		
State: District:			

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement this Period NAMES OF THE OWNERS OF Category/ Type Office Sought: Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement this Period MEALS Candidate Name Category/ Type Office Sought: House Disbursement For: Primary Senate General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Mailing A Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Primary General Senate President Other (specify) District: State: SUBTOTAL of Disbursements This Page (optional).....

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

STATE OF INDIANA

Vailing Address

N. MERIDIAN ST.

PAGE FOR LINE NUMBER: OF Use separate schedule(s) (check only one) for each category of the ₹17 19b 19a **Detailed Summary Page** 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Full Name (Last, First, Middle Initial) Date of Disbursement , Amount of Each Disbursement this Period

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	Purpose of Disbursement	the production of the control of	1749
	Candidate Name	Category/ Type	·
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	Full Name (Last, First, Middle Initial)		
В.	OK CATE		Date of Disbursement
	Mailing Address W PACES FULLY RD P	W	and designed state of the state
	ATLANTA GA 3532	7	Amount of Each Disbursement this Period
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	MEAUS Candidate Name	Category/ Type	
	Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:		
С.	Full Name (Last, First, Middle Initial) WILDWOOD TRAVEL CEPTER		Date of Disbursement
	Mailing Address		12 39 2013
	City WILDWOOD FL 34785		Amount of Each Disbursement this Period
	Purpose of Disbursement AS	Control of the Contro	7000
	Candidate Name	Category/ Type	•
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF (check only one)
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Candidate Name	Category Type	"
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President Other (s	pecify)	· ·
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Candidate Name	Category Type	t .
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President Other (s	<u></u> }	
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E. INILCO		Date of Disbursement
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (IN Full) JD MINIEM FOR	CONGRE	33				
Full Name (Last, First, Middle Initial)		·				
A FLASH FOODS	·	Date of Disbursement				
Mailing Address SAM NUNN BLVI		10 19 2013				
City PERRY 6A	Zip Code 0 6 9	Amount of Each Disbursement this Period				
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Candidate Name	Category Type	. 1				
Office Sought: House Disbursement Fol Senate Primary Other (state: District:	General					
Full Name (Last, First, Middle Initial)	<u> </u>					
B. SHELTER		Date of Disbursement				
Mailing Address 4027 KENTVCKY AVE		12'(°7' 2013				
TUDIANA POUS TH	Zip Code 46221	Amount of Each Disbursement this Period				
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c. SAMS CLUB		Date of Disbursement				
Mailing Address E 9674						
IN DIANAPOUS IN	ip Code 46250	Amount of Each Disbursement this Period				
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Candidate Name	Category Type					
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Use separate schedule(s)

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NAME OF COMMITTEE (IN FUII) SD MINICAR F	OR CONGRE	22	,		
Full Name (Last, First, Middle Initial) A. MEXICO CLTY GRICL Mailing Address IIG53 FISHERS STATION City FISHERS Purpose of Disbursement MEAUS Candidate Name Office Sought: House Disbursement For Senate	Zip Code Life 38	Date of Disbur	19 ch Disburse	14	Period
President Other (s State: District: Full Name (Last, First, Middle Initial)	<u></u>	·		.=	
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Any INTERACTER COMMITTEE (In Full)

	SD MINIEAR FOR CONGR	E53		
Α.	Full Name (Last, First, Middle Initial) WAL-MART Mailing Address 4650 S. EMERSON AUE	Date of Disbursement		
	City LY DIANAPOLLS State Zip Code TU H6203 Purpose of Disbursement DFACE SUPPLIES Candidate Name Category/ Type Office Sought: Primary General President Other (specify) State: District:	Amount of Each Disbursement this Period		
В.	Full Name (Last, First, Middle Initial) SPEROWAY Mailing Address 105 CHURCHMAN AVE	Date of Disbursement		
	City GETCH GEOUX Purpose of Disbursement FUEL Candidate Name Category/ Type Office Sought: Senate Primary Other (specify) State: District:	Amount of Each Disbursement this Period		
C. _.	Full Name (Last, First, Middle Initial) Mailing Address	Date of Disbursement		
	City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General	Amount of Each Disbursement this Period		
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SCHEDULE C (FEC Form 3) LOANS

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IAME OF COMMITTEE (In Full)											
JD MINICAR F	OR CONGRESS										
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:										
MINIEAR +D	Primary										
Mailing Address	General Other (specify) ▼										
112 S. 17 TH AVE											
City State	ZIP Code										
BEECH GROVE THE 46107 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This F											
						TERMS Date Incurred Date Due Interest Rate Secured:					
						72'85'20'13 MM' 00' V V V W (apr) 0 0					
List All Endorsers or Guarantors (if any) to Loan Source	ee Yes No										
1. Full Name (Last, First, Middle Initial)	Name of Employer										
Mailing Address	Occupation										
	Amount										
City State ZIP Code	Guaranteed Outstanding:										
2. Full Name (Last, First, Middle Initial)	Name of Employer										
Mailing Address	Occupation										
	Amount										
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(8/2013)

PREPARER